Filing Fee: \$20.00

ID Number: 144748



Form No. 642 Revised: 12/05

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

LIMITED LIABILITY COMPANY

STATEMENT OF CHANGE OF RESIDENT AGENT

Pursuant to the provisions of Section 7-16-11 of the General Laws, 1956, as amended, the undersigned authorizes a change of its resident agent and the address of its resident agent in the state of Rhode Island as follows:

1.	The name of the limited liability company is: Lower Properties LLC
2.	The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is: 497 HOO Received Ave., Errovidence RL 02907
3.	The NEW address of the resident agent is: 11 Woburn St., Cranston R1 02910
4.	The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is: Destermo The name of the NEW resident agent is:
5.	The name of the NEW resident agent is:
6.	The appointment of a new resident agent and the change of address of the resident agent, as the case may be; small become effective upon the filing of this statement.
	Under penalty of perjury, I declare that the information contained herein is true and correct.
	ate: 11/19/10 LOYAN PROPERTIES LLC
Da	Print Name of Limited Liability Company
	FILED
	Signature of Authorized Person
	√ - 2010